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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)							Application Number 10/660317		Filing Date 9-11-2003		
							Applicant(s) James G. Vanden Eynden				
* May be used for additional claims or amendments											
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1	X		X								
2		X		X							
3		X		X							
4		X		X							
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14	X		X								
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44		X		X							
45		X		X							
46		X		X							
47		X		X							
48		X		X							
49		X		X							
50		X		X							
Total Indep	2		4								
Total Depend	31		29								
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